510(k) Summary

6. 510(k) Summary

DEC 1 8 2012

This 510(k) summary information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

APPLICANT:

Renfro Corporation

DATE PREPARED:

October 31, 2012

CONTACT PERSON:

Rebecca K Pine

Renfro Corporation

PO Box 908

611 Linville Road Mount Airy, NC 27030 Phone: (760) 809.5178

TRADE NAME:

Dr. Scholl's Compression Socks

COMMON NAME:

Compression Socks

CLASSIFICATION

Medical Support Stockings

NAME:

DEVICE

Class 2, per 21 CFR 880.5780

CLASSIFICATION:

PRODUCT CODE

DWL

PREDICATE DEVICES: Elastic Therapy, Inc. Rx Fit Medical Socks (K925643)

Substantially Equivalent To:

The Renfro Compression Socks are substantially equivalent in intended use, principal of operation and technological characteristics to the Elastic Therapy, Inc. Rx Fit Medical Socks (K925643).

Description of the Device Subject to Premarket Notification:

The Renfro Compression Socks are devices intended to help prevent pooling of blood and fluid to the extremities by applying controlled pressure. The Renfro compression socks are knitted using yarns made of nylon, polyester, cotton and spandex.

Indication for Use:

The Renfro Compression Socks are intended to help prevent pooling of blood in the legs by controlled pressure in the legs and help prevent deep vein thrombosis (DVT), edema and leg discomfort in individuals subjected to immobility.

Technical Characteristics:

The Renfro Compression Socks have similar physical and technical characteristics to the predicate devices. These characteristics are tabulated below:

Characteristics	Renfro Compression Socks	Elastic Therapy, Inc, Rx Fit Medical Socks
Function	Prevent pooling of blood in legs	Prevent pooling of blood in legs
Principle of Operation	Application of controlled pressure	Application of controlled pressure
Anatomical Site	Foot/leg	Foot/leg
Prescription/ over-the-counter use	Over-the-counter	- Over-the-counter

Performance Data:

All necessary performance testing has been conducted for the Renfro Compression Socks to assure substantial equivalence to the predicate devices and demonstrate the devices perform as intended. All testing was performed on test units representative of finished devices. Testing included:

• Comparative compression strength

Basis for Determination of Substantial Equivalence:

Upon reviewing the safety and efficacy information provided in this submission and comparing intended use, principle of operation and overall technological characteristics, the Renfro Compression Socks are determined by Renfro Corporation, to be substantially equivalent to existing legally marketed devices.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

December 18, 2012

Ms. Rebecca K. Pine Renfro Corporation PO Box 908 661 Linville Road MOUNT AIRY NC 27030

Re: K123398

Trade/Device Name: Renfro Compression Socks

Regulation Number: 21 CFR 880.5780

Regulation Name: Medical Support Stocking

Regulatory Class: II Product Code: DWL Dated: October 31, 2012 Received: November 5, 2012

Dear Ms. Pine:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Anthony D. Watson, B.S., M.S., M.B.A.

Director

Division of Anesthesiology, General Hospital,

Respiratory, Infection Control and

Dental Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

5. Indications for Use Statement

510(k) Number (if known): 123398

Device Name: Renfro Compression Socks

INDICATIONS FOR USE STATEMENT

Indications for Use:	
The Renfro Compression Socks are intended to he by controlled pressure in the legs and help prevent and leg discomfort in individuals subjected to im	nt deep vein thrombosis (DVT), edema
AND/OR	. •
Prescription Use	Over-The-Counter Use_X
(Part 21 CFR 801 Subpart D)	(21 CFR 801 Subpart C)
PAGE IF NEEDED) Concurrence of CDRH, Office of	Device Evaluation (ODE)
	• •
	Page of
Digitally signed by Richard C.	
Chapman Date: 2012.12,18 13:15:58 -05'00'	
Chapman Date: 2012.12.18 13:15:58 -05'00' (Division Sign-Off) Division of Anesthesiology, General Hospital Infection Control, Dental Devices	
Chapman Date: 2012.12.18 13:15:58 -05'00' (Division Sign-Off) Division of Anasthesiology, General Hospital	